

HAWAII STATE ETHICS COMMISSION

1001 Bishop Street, American Savings Bank Tower 970 P.O. Box 616, Honolulu, Hawaii 96809 Telephone: 587-0460 FAX: 587-0470

	GIFTS DISCLOSURE STATEM	ENT
(This	s report covers the period from June 1 of the preceding calendar year through	lune 1 of this year and is due on June 30)
AME:		STATE POSITION:
MATS	SUMURA, Dawn Eiko	Administrative Services Specialist
TATE AGENCY:		STATE TEL. NO.:
Offi	ice of the Lieutenant Governor	586-0255

STATE MAILING ADDRESS:

415 South Beretania Street State Capitol Building, 5th Floor Honolulu, Hawaii 96813

DONOR	DESCRIPTION OF GIFT	3 REC'D	GIFT 4 VALUE	AGG. VALUE
NONE				
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1 DONOR	2 DESCRIPTION OF GIFT	DATE REC'D	GIFT VALUE	AGG. 5 VALUE
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Check here if	you have attached	additional	sheets
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CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement.

Daun & Matsumura	5/25/04	
	DATE	

SIGNATURE

DATE